



Centers for Disease Control and Prevention Fiscal Year 2011 Grants Funding Data

What's New

Updates CDC made to the Funding Tool

CDC made the following updates to the Grants Funding Profiles tool:

- Added the FY2011 data set and jurisdictional summaries, 2011 “About the Data” file, “What’s New” file, and other user guides
- Added the ability to choose what year of data to view. The tool opens by default to the latest year of data available (i.e., 2011). Users can choose to select and view/obtain data from previous years (i.e., 2010).
- Updated the interface for the Query Tab

What's New for the FY2011 Funding Data Set

- More subcategories are tracked in the Public Health and Prevention Fund (PPHF)/Other ACA category in 2011 than in 2010. In addition, all PPHF grants and cooperative agreements are included, even if they meet any of the criteria for exclusion under other data rules.
- Funding for the Behavioral Risk Factor Surveillance System is included.
- The Data Exclusions section has been updated to reflect the two issues above and in some cases provide more granularity for specific issues, such as World Trade Center funds:
 - The following grants and cooperative agreements data were outside the scope of this profile and were excluded: funding of International activities, Reimbursable Agreements (funds from other federal agencies to support their missions), Cooperative Research and Development Agreements, Royalties, User Fees and Intra-Departmental Delegation of Authority funds (fund transfers to CDC from DHHS), PEPFAR (President's Emergency Plan for AIDS Relief), Gifts and Donations, American Reinvestment and Recovery Act (ARRA) funds, Public Health Scientific Services (except BRFSS) funds, Global Health funds, Business Services Support funds, Buildings and Facilities funds, Public Health Improvement and Leadership funds, Public Health Workforce/Workforce Development funds (except for ACA), World Trade Center funds, Public Health Preparedness SBIR and PHS Evaluation Set-Aside funds and Public Health Service funds.

Data Interpretation

In addition to the following factors that need to be taken into consideration for a single funding year, there are unique factors to consider when looking across years. The following covers both issues.

- These data are useful as a snapshot of CDC grant and cooperative agreement funding provided to grantees in states and territories under specific categories. However, caution should be used in interpreting variations in funding levels. Several of the reasons for variations are (1) eligible applicants in states or territories do not apply for every funding opportunity, (2) most federal funding is awarded via a competitive or merit-based process and not all states or territories that

apply are funded, and (3) some funding is allocated according to a pre-set formula (such as per capita allocation or a need-based funding allocation), which is sometimes specified in law.

- Users of the data should be aware of factors that make comparisons of data between jurisdictions and by per capita difficult to interpret and which may lead to inaccurate conclusions in the absence of more in-depth study. Some of those factors include the following:
 - CDC has many different grant types with differing application eligibility and award criteria such as population disease burden, per capita formula-based, competitive based on proposal merit, non-competitive, etc.
 - Awards made to an entity will typically reflect the geographic location of the entity's official business or billing address such as a State capitol for a State government award. The awards therefore will not reflect the actual geographic application of the funds by the grantee in carrying out the purpose of the grant.
 - CDC makes awards to various national associations that carry out national public health programs that have nationwide impact; however, the awards will be reflected in the geographic jurisdiction of the association's main office.

New for interpretation of data across years:

- There may be variation across years for where a program/activity resides in CDC's organizational and budget structure. Funding sources linked to a particular program/activity may also vary year-to-year. Therefore, it is possible for a multi-year project to fall into one category or sub-category one year and into another the next. This makes 1:1 comparisons of one year's set of projects to another year's set of projects under each category or sub-category a challenge.
- Two major trends affecting the data from FY2010 to FY2011 were the following: (1) increased Prevention and Public Health Fund/Other ACA funding and implementation, and (2) the fact that CDC's FY 2011 base budget was cut \$740M—more than 11%—from the FY 2010 level.